

Docket No.  
24047.370B- US

# Declaration For Patent Application

## English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

**The Use of Anabolic Agents, Anti-Catabolic Agents, Antioxidant Agents and Analgesics for Protection, Treatment and Repair of Connective Tissues in Humans and Animals**

the specification of which

(check one)

☐ is attached hereto.

☒ was filed on March 23, 1999 as United States Application No. or PCT International Application Number 09/274,881 and was amended on \_\_\_\_\_

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

(Number)

(Country)

(Day/Month/Year Filed)

☐

(Number)

(Country)

(Day/Month/Year Filed)

☐

(Number)

(Country)

(Day/Month/Year Filed)

☐

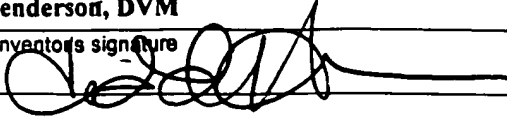
I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

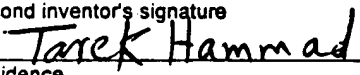
<u>60/074,594</u>	<u>February 13, 1998</u>
(Application Serial No.)	(Filing Date)
<u>60/088,205</u>	<u>June 5, 1998</u>
(Application Serial No.)	(Filing Date)
<u>                    </u>	<u>                    </u>
(Application Serial No.)	(Filing Date)

I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, CFR Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:


<u>09/249,335</u>	<u>February 12, 1999</u>	<u>Pending</u>
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)
<u>                    </u>	<u>                    </u>	<u>                    </u>
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)
<u>                    </u>	<u>                    </u>	<u>                    </u>
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor <b>Todd R. Henderson, DVM</b>	
Sole or first inventor's signature 	Date <b>5/7/99</b>
Residence <b>1604 Randallwood Court, Jarrettsville, MD 21084</b>	
Citizenship <b>US</b>	
Post Office Address <b>1604 Randallwood Court, Jarrettsville, MD 21084</b>	

Full name of second inventor, if any <b>Tarek Hammad</b>	
Second inventor's signature 	Date <b>5/14/99</b>
Residence <b>715 Crosby Road, Baltimore, MD 21228</b>	
Citizenship <b>Citizen of Egypt</b>	
Post Office Address <b>715 Crosby Road, Baltimore, MD 21228</b>	

Full name of third inventor, if any <b>Medhat Soliman</b>	
Third inventor's signature	Date
Residence <b>81 Ramsis Street, Minya, Egypt 61111</b>	
Citizenship <b>Citizen of Egypt</b>	
Post Office Address <b>81 Ramsis Street, Minya, Egypt 61111</b>	

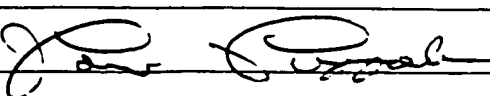
Full name of fourth inventor, if any <b>Barbara Corson</b>	
Fourth inventor's signature 	Date <b>5-14-99</b>
Residence <b>225 Kunkle Road, Fawn Grove, PA 17321</b>	
Citizenship <b>US</b>	
Post Office Address <b>225 Kunkle Road, Fawn Grove, PA 17321</b>	

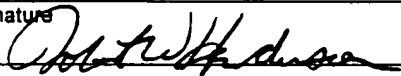
Full name of sole or first inventor <b>Todd R. Henderson, DVM</b>	
Sole or first inventor's signature	Date
Residence <b>1604 Randallwood Court, Jarrettsville, MD 21084</b>	
Citizenship <b>US</b>	
Post Office Address <b>1604 Randallwood Court, Jarrettsville, MD 21084</b>	

Full name of second inventor, if any <b>Tarek Hammad</b>	
Second inventor's signature	Date
Residence <b>715 Crosby Road, Baltimore, MD 21228</b>	
Citizenship <b>Citizen of Egypt</b>	
Post Office Address <b>715 Crosby Road, Baltimore, MD 21228</b>	

Full name of third inventor, if any <b>Medhat Soliman</b> <i>Medhat Soliman</i>	
Third inventor's signature	Date <i>5/10/99</i>
Residence <b>81 Ramsis Street, Minya, Egypt 61111</b>	
Citizenship <b>Citizen of Egypt</b>	
Post Office Address <b>81 Ramsis Street, Minya, Egypt 61111</b>	

Full name of fourth inventor, if any <b>Barbara Corson</b>	
Fourth inventor's signature	Date
Residence <b>225 Kunkle Road, Fawn Grove, PA 17321</b>	
Citizenship <b>US</b>	
Post Office Address <b>225 Kunkle Road, Fawn Grove, PA 17321</b>	

Full name of fifth inventor, if any <b>Louis Lippiello</b>	
Fifth inventor's signature 	5-5-99 Date
Residence <b>13225 North 83rd Place, Scottsdale, Arizona 85260</b>	
Citizenship <b>US</b>	
Post Office Address <b>13225 North 83rd Place, Scottsdale, Arizona 85260</b>	

Full name of sixth inventor, if any <b>Robert Henderson</b>	
Sixth inventor's signature 	5/10/99 Date
Residence <b>2807 Shady Grove Court, Baldwin, MD 21013</b>	
Citizenship <b>US</b>	
Post Office Address <b>2807 Shady Grove Court, Baldwin, MD 21013</b>	

Full name of seventh inventor, if any	
Seventh inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of eighth inventor, if	
Eighth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY  
STATUS (37 CFR 1.9(f) AND 1.27 (b)) - INDEPENDENT INVENTOR**

Docket No.  
24047.370B-US

Serial No.  
09/274,881

Filing Date  
March 23, 1999

Patent No.

Issue Date

Applicant/  
Patentee: **Todd R. Henderson; Tarek Hammad; Medhat Soliman; Barbara Corson; Louis Lippiello; Robert Henderson**  
Assignee: **NUTRAMAX LABORATORIES, INC.**

Invention: **THE USE OF ANABOLIC AGENTS, ANTI-CATABOLIC AGENTS, ANTIOXIDANT AGENTS AND ANALGESICS FOR PROTECTION, TREATMENT AND REPAIR OF CONNECTIVE TISSUES IN HUMANS AND ANIMALS**

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled above and described in:

- ☐ the specification to be filed herewith.  
☒ the application identified above.  
☐ the patent identified above.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☐ No such person, concern or organization exists.  
☒ Each such person, concern or organization is listed below.

\*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities (37 CFR 1.27)

FULL NAME **NUTRAMAX LABORATORIES, INC.**

ADDRESS **2208 Lakeside Boulevard, Edgewood, Maryland 21040**
☐ Individual ☒ Small Business Concern ☐ Nonprofit Organization

FULL NAME

ADDRESS

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME

ADDRESS

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME

ADDRESS

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF INVENTOR Todd R. Henderson

SIGNATURE OF INVENTOR 

DATE: 5/7/99

NAME OF INVENTOR Tarek Hammad

SIGNATURE OF INVENTOR Tarek Hammad

DATE: 5/14/99

NAME OF INVENTOR Medhat Soliman

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR Barbara Corson

SIGNATURE OF INVENTOR 

DATE: 5/14/99

NAME OF INVENTOR Louis Lippiello

SIGNATURE OF INVENTOR 

DATE: 5-5-99

NAME OF INVENTOR Robert W. Henderson

SIGNATURE OF INVENTOR 

DATE: 5/10/99

NAME OF INVENTOR \_\_\_\_\_

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR \_\_\_\_\_

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR \_\_\_\_\_

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR \_\_\_\_\_

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

<b>VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) AND 1.27 (c)) - SMALL BUSINESS CONCERN</b>			Docket No. <b>24047.370B-US</b>
Serial No. <b>09/274,881</b>	Filing Date <b>March 23, 1999</b>	Patent No.	Issue Date
Applicant/ Patentee: <b>Todd R. Henderson; Tarek Hammad; Medhat Soliman; Barbara Corson; Louis Lippiello; Robert Henderson</b> Assignee: <b>NUTRAMAX LABORATORIES, INC.</b>			
Invention: <b>THE USE OF ANABOLIC AGENTS, ANTI-CATABOLIC AGENTS , ANTIOXIDANT AGENTS AND ANALGESICS FOR PROTECTION, TREATMENT AND REPAIR OF CONNECTIVE TISSUES IN HUMANS AND ANIMALS</b>			
<p>I hereby declare that I am:</p> <p><input type="checkbox"/> the owner of the small business concern identified below:</p> <p><input checked="" type="checkbox"/> an official of the small business concern empowered to act on behalf of the concern identified below:</p> <p>NAME OF CONCERN: <u><b>NUTRAMAX LABORATORIES, INC.</b></u></p> <p>ADDRESS OF CONCERN: <u><b>2208 Lakeside Boulevard, Edgewood, Maryland 21040</b></u></p> <p>I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.</p> <p>I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the above identified invention described in:</p> <p><input type="checkbox"/> the specification filed herewith with title as listed above.</p> <p><input checked="" type="checkbox"/> the application identified above.</p> <p><input type="checkbox"/> the patent identified above.</p> <p>If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed on the next page and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).</p>			



Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☒ no such person, concern or organization exists.  
☐ each such person, concern or organization is listed below.

FULL NAME

ADDRESS

☐

Individual

☐

Small Business Concern

☐

Nonprofit Organization

FULL NAME

ADDRESS

☐

Individual

☐

Small Business Concern

☐

Nonprofit Organization

FULL NAME

ADDRESS

☐

Individual

☐

Small Business Concern

☐

Nonprofit Organization

FULL NAME

ADDRESS

☐

Individual

☐

Small Business Concern

☐

Nonprofit Organization

Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING:

Robert W. Henderson

TITLE OF PERSON SIGNING

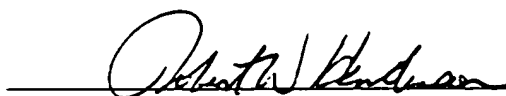
OTHER THAN OWNER:

President

ADDRESS OF PERSON SIGNING:

2807 Shady Grove Court  
Baldwin, Maryland 21013

SIGNATURE:



DATE:

5/10/99

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF INVENTOR Todd R. Henderson

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR Tarek Hammad

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR Medhat Soliman

SIGNATURE OF INVENTOR Medhat Soliman

DATE: 5/10/99

NAME OF INVENTOR Barbara Corson

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR Louis Lippiello

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR Robert W. Henderson

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR \_\_\_\_\_

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR \_\_\_\_\_

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR \_\_\_\_\_

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

NAME OF INVENTOR \_\_\_\_\_

SIGNATURE OF INVENTOR \_\_\_\_\_

DATE: \_\_\_\_\_

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/192,318-Conf. #8925
	Filing Date	July 11, 2002
	First Named Inventor	Todd R. Henderson
	Art Unit	1617
	Examiner Name	S. Wang
	Attorney Docket Number	024047.370B-US01

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

☐ Please change the correspondence address for the above-identified application to:

☐ The address associated with  
Customer Number:

OR

☐ Firm or  
Individual Name


Address	1201 Pennsylvania Avenue, NW				
City	Washington				
Country	USA	State	D.C.	Zip	20004-2401
Telephone	202.662.6000		Fax	202.662.6291	

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Kristen E. Blanchard		
Signature			
Date	March 17, 2004	Telephone	(410) 776-4034

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Todd R. Henderson et al.Application No./Patent No.: 10/192,318Filed/Issue Date: July 11, 2002Entitled: THE USE OF ANABOLIC AGENTS, ANTI-CATABOLIC AGENTS, ANTIOXIDANT AGENTS, AND ANALGESICS FOR PROTECTION, TREATMENT AND REPAIR OF CONNECTIVE TISSUES IN HUMANS AND ANIMALSNUTRAMAX LABORATORIES, INC.

(Name of Assignee)

, a

Corporation

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.

The extent (by percentage) of its ownership interest is \_\_\_\_\_ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 014107, Frame 0603, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

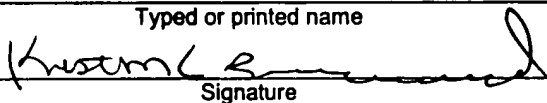
1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
2. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

[ ] Additional documents in the chain of title are listed on a supplemental sheet.

- [ ] Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

mwdn 11, 2004  
Date(410) 776-4034  
Telephone NumberKristen E. Blanchard  
Typed or printed name  
SignatureVice President, Legal & Government Affairs  
Title